

1 / 92

FF1AN060.PDF

**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS****2 / 92**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

**MIKE GRAVEL FOR PRESIDENT 2008**

Report Covering the Period

From: 01/01/2008

To: 03/31/2008

<b>I. RECEIPTS</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	.....	44058.40	491437.37
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	501.60
(d) The Candidate	.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		44058.40	491938.97
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	0.00	73515.73
(b) Other Loans	.....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	0.00	73515.73
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	0.00	0.00
(b) Fundraising	.....	0.00	0.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		0.00	0.00
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	5784.70	5784.70
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	49843.10	571239.40
<b>II. DISBURSEMENTS</b>			
23. OPERATING EXPENDITURES	.....	40317.65	538546.99
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	.....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	0.00	25900.00
(b) Other Repayments	.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	0.00	25900.00
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	0.00	0.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	0.00	0.00
29. OTHER DISBURSEMENTS	.....	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	40317.65	564446.99
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE**  
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)  
 (PAGE 3, FEC FORM 3P)

3 / 92

**1. NAME OF COMMITTEE (in full)****MIKE GRAVEL FOR PRESIDENT 2008****ADDRESS (number and street)**

1600 N OAK ST #1412

**CITY, STATE, and ZIP CODE**

ARLINGTON

VA

22209

**2. IDENTIFICATION NUMBER**

C00423202

## ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	10454.40
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachussetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			<b>TOTALS</b>	<b>0.00</b>	<b>10454.40</b>

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 4 / 92

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Donna Adams

Mailing Address

2454B Westcliffe Ln.

City

Walnut Creek

State

CA

Zip Code

94597

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self-employed

Occupation  
Caregiver

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

563.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 5 / 2 0 0 8

Amount of Each Receipt this Period

563.00

CONTRIBUTION

Transaction ID: SA17A.18906

B.

Full Name (Last, First, Middle Initial)

Rusman R. Anderson

Mailing Address

PO Box 166

City

Bayside

State

CA

Zip Code

95524

FEC ID number of contributing  
federal political committee.

Name of Employer  
Nine Stars Grp. (self)|Se-  
nior Programm

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 1 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.18866

C.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1470.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 9 / 2 0 0 8

Amount of Each Receipt this Period

70.00

CONTRIBUTION

Transaction ID: SA17A.18423

SUBTOTAL of Receipts This Page (optional) .....

883.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 / 92

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1535.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 7 / 2 0 0 8

Amount of Each Receipt this Period

65.00

CONTRIBUTION

Transaction ID: SA17A.18372

B.

Full Name (Last, First, Middle Initial)

Shawn Beltz

Mailing Address

4738 s 6th st

City

Louisville

State

KY

Zip Code

40214

FEC ID number of contributing  
federal political committee.

Name of Employer  
CompuCom

Occupation

System Administrator

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 8 / 2 0 0 8

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.18799

C.

Full Name (Last, First, Middle Initial)

Shawn Beltz

Mailing Address

4738 s 6th st

City

Louisville

State

KY

Zip Code

40214

FEC ID number of contributing  
federal political committee.

Name of Employer  
CompuCom

Occupation

System Administrator

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 1 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.19201

SUBTOTAL of Receipts This Page (optional) .....

415.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 92

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Lemke Brett Mailing Address 1900 H Street #2 City State Zip Code Sacramento CA 95811 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 260.93	Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8 Amount of Each Receipt this Period 260.93 CONTRIBUTION Transaction ID: SA17A.18307
<b>B.</b> Full Name (Last, First, Middle Initial) Matthew Calabaza Mailing Address POB 5337 City State Zip Code Bernalillo NM 87004 FEC ID number of contributing federal political committee. Name of Employer Occupation FAA Tech Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00	Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 8 Amount of Each Receipt this Period 100.00 CONTRIBUTION Transaction ID: SA17A.18966
<b>C.</b> Full Name (Last, First, Middle Initial) Sikorra Chad Mailing Address 1600 Swartz Dr Apt 23 City State Zip Code Waukesha WI 53188 FEC ID number of contributing federal political committee. Name of Employer Occupation Goodwill Industries of So- utheastern WI PC Support Specialist Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 375.00	Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 8 Amount of Each Receipt this Period 50.00 CONTRIBUTION Transaction ID: SA17A.19601

**SUBTOTAL** of Receipts This Page (optional) .....

410.93

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 92

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

HEITSCH CHARLES

Mailing Address

13321 STATE HWY N

City

BOURBON

State

MO

Zip Code

65441

FEC ID number of contributing  
federal political committee.Name of Employer  
RETIREDOccupation  
chemist

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	9	/	2	0	0	8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.18504

B.

Full Name (Last, First, Middle Initial)

Herrera Christian

Mailing Address

576 W. 21st Street

City

San Pedro

State

CA

Zip Code

90731

FEC ID number of contributing  
federal political committee.Name of Employer  
Los Angeles Unified School  
DistrictOccupation  
Teacher

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

283.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	1	/	2	0	0	8

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.18267

C.

Full Name (Last, First, Middle Initial)

Benacci Christina

Mailing Address

2202 Gunter Bay

City

San Antonio

State

TX

Zip Code

78245

FEC ID number of contributing  
federal political committee.Name of Employer  
SelfOccupation  
Lawyer

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1166.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	0	8

Amount of Each Receipt this Period

57.62

CONTRIBUTION

Transaction ID: SA17A.18271

SUBTOTAL of Receipts This Page (optional) .....

357.62

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 92

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Bruce Coary Mailing Address 1146 Julie Lane City State Zip Code Crete IL 60417 FEC ID number of contributing federal political committee. Name of Employer Palos Community Hospital Occupation IT Support Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8 Amount of Each Receipt this Period 50.00 CONTRIBUTION Transaction ID: SA17A.19309
<b>B.</b> Full Name (Last, First, Middle Initial) Bruce Coary Mailing Address 1146 Julie Lane City State Zip Code Crete IL 60417 FEC ID number of contributing federal political committee. Name of Employer Palos Community Hospital Occupation IT Support Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00	Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 8 Amount of Each Receipt this Period 50.00 CONTRIBUTION Transaction ID: SA17A.19475
<b>C.</b> Full Name (Last, First, Middle Initial) Bryan David Mailing Address 5939 e 32nd st City State Zip Code tucson AZ 85711 FEC ID number of contributing federal political committee. Name of Employer retired Occupation retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 302.75	Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 8 Amount of Each Receipt this Period 50.00 CONTRIBUTION Transaction ID: SA17A.18454

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....



# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 92

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Bryan David

Mailing Address

5939 e 32nd st

City

tucson

State

AZ

Zip Code

85711

FEC ID number of contributing  
federal political committee.

Name of Employer  
retired

Occupation  
retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

327.75

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.18305

B.

Full Name (Last, First, Middle Initial)

Oyog David

Mailing Address

2437 W Monterey Ave

City

Stockton

State

CA

Zip Code

95204

FEC ID number of contributing  
federal political committee.

Name of Employer  
AT&T

Occupation  
operator

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 7 / 2 0 0 8

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.18435

C.

Full Name (Last, First, Middle Initial)

Oyog David

Mailing Address

2437 W Monterey Ave

City

Stockton

State

CA

Zip Code

95204

FEC ID number of contributing  
federal political committee.

Name of Employer  
AT&T

Occupation  
operator

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 8 / 2 0 0 8

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.18366

SUBTOTAL of Receipts This Page (optional) .....

225.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 92

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Oyog David</p> <p>Mailing Address 2437 W Monterey Ave</p> <p>City State Zip Code Stockton CA 95204</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer AT&amp;T</p> <p>Occupation operator</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 750.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.18270</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) roger dittmann</p> <p>Mailing Address California Stat University Physics Dept</p> <p>City State Zip Code Fullerton CA 92834</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Magnetecs corporation</p> <p>Occupation nuclear physicist</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 650.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.19342</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Shelagh Eldon</p> <p>Mailing Address 303 Velocity Way</p> <p>City State Zip Code Foster City CA 94404</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer EFI</p> <p>Occupation</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 225.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 75.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.19476</p>

**SUBTOTAL** of Receipts This Page (optional) .....

375.00

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 92

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

DARIUS ENGEL

Mailing Address

P.O. Box 117330

City

GAINSVILLE

State

FL

Zip Code

32611

FEC ID number of contributing  
federal political committee.

Name of Employer  
UNIVERSITY OF FLORIDA

Occupation  
RESERCHER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

5.00

DONATION

Transaction ID: SA17A.5057

B.

Full Name (Last, First, Middle Initial)

Esther Franklin

Mailing Address

3980 McKinley Blvd

City

Sacramento

State

CA

Zip Code

95809

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 1 / 2 0 0 8

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.19456

C.

Full Name (Last, First, Middle Initial)

Hugh Giordano

Mailing Address

425 Conarroe Street

City

Philadelphia

State

PA

Zip Code

19128

FEC ID number of contributing  
federal political committee.

Name of Employer  
UFCW local 152

Occupation  
Organizer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

257.49

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 9 / 2 0 0 8

Amount of Each Receipt this Period

257.49

CONTRIBUTION

Transaction ID: SA17A.18586

SUBTOTAL of Receipts This Page (optional) .....

312.49

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 92

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

David Glatstein

Mailing Address

Gracie Station, P.O. Box 1261

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing  
federal political committee.

Name of Employer  
None

Occupation  
None

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 9 / 2 0 0 8

Amount of Each Receipt this Period

400.00

CONTRIBUTION

Transaction ID: SA17A.18819

B.

Full Name (Last, First, Middle Initial)

james goller

Mailing Address

696 no. robertson Blvd

City

West Hollywood

State

CA

Zip Code

90069

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 5 / 2 0 0 8

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.19279

C.

Full Name (Last, First, Middle Initial)

james goller

Mailing Address

696 no. robertson Blvd

City

West Hollywood

State

CA

Zip Code

90069

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2459.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Amount of Each Receipt this Period

159.40

CONTRIBUTION

Transaction ID: SA17A.18912

SUBTOTAL of Receipts This Page (optional) .....

2859.40

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 92

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

nathan goller

Mailing Address

655 n. robertson blvd

City

west hollywood

State

CA

Zip Code

90069

FEC ID number of contributing  
federal political committee.Name of Employer  
None

Occupation

ATTORNEY

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	8

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.19515

B.

Full Name (Last, First, Middle Initial)

THORON GRENVILLE

Mailing Address

P.O.BOX 279

City

DUBLIN

State

NH

Zip Code

03444

FEC ID number of contributing  
federal political committee.Name of Employer  
SELF

Occupation

GRAPHIC DESIGNER

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	1	/	2	0	0	8

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.18514

C.

Full Name (Last, First, Middle Initial)

Jason Greschler

Mailing Address

2514 Clairemont Dr #311

City

San Diego

State

CA

Zip Code

92117

FEC ID number of contributing  
federal political committee.Name of Employer  
Intuit

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	8

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.19538

SUBTOTAL of Receipts This Page (optional) .....

2900.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 92

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

David Grotke

Mailing Address

15 Dorchester Rd.

City

Snyder

State

NY

Zip Code

14226

FEC ID number of contributing  
federal political committee.Name of Employer  
n/aOccupation  
retired

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	8	/	2	0	0	8

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.18802

B.

Full Name (Last, First, Middle Initial)

Jerold Huebner

Mailing Address

449 Troutman St #33

City

Brooklyn

State

NY

Zip Code

11237

FEC ID number of contributing  
federal political committee.Name of Employer  
Simpson Thacher & Bartle-  
tt LLPOccupation  
paralegal

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	0	8

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Transaction ID: SA17A.19530

C.

Full Name (Last, First, Middle Initial)

eugene jaleski

Mailing Address

671 cedar street

City

longboat key

State

FL

Zip Code

34228

FEC ID number of contributing  
federal political committee.Name of Employer  
retiredOccupation  
computer systems designer

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	8

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.19464

SUBTOTAL of Receipts This Page (optional) .....

200.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 92

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.	Full Name (Last, First, Middle Initial) Goodner James		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 8	
	Mailing Address 134 Beverly Road		Amount of Each Receipt this Period 500.00	
	City West Palm Beach	State FL		
	FEC ID number of contributing federal political committee.		CONTRIBUTION	
	Name of Employer Maz Energy, Inc.	Occupation Chief Financial Officer		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00			
			Transaction ID: SA17A.18439	
B.	Full Name (Last, First, Middle Initial) HURT JAMES		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 8	
	Mailing Address P.O. BOX 322		Amount of Each Receipt this Period 50.00	
	City SAVOY	State IL		
	FEC ID number of contributing federal political committee.		CONTRIBUTION	
	Name of Employer	Occupation		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 270.00			
			Transaction ID: SA17A.18490	
C.	Full Name (Last, First, Middle Initial) adler jamie		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 8	
	Mailing Address 8772 Beverly Boulevard		Amount of Each Receipt this Period 2300.00	
	City Los Angeles	State CA		
	FEC ID number of contributing federal political committee.		CONTRIBUTION	
	Name of Employer phyllis morris	Occupation designer		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00			
			Transaction ID: SA17A.18320	

SUBTOTAL of Receipts This Page (optional) .....

2850.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 92

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Peter Jenkins

Mailing Address

8950 Myrtle Drive

City

Douglasville

State

GA

Zip Code

30134

FEC ID number of contributing  
federal political committee.

Name of Employer  
U.S. Govt.

Occupation

Administrative

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

577.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 1 / 2 0 0 8

Amount of Each Receipt this Period

77.00

CONTRIBUTION

Transaction ID: SA17A.18605

B.

Full Name (Last, First, Middle Initial)

Peter Jenkins

Mailing Address

8950 Myrtle Drive

City

Douglasville

State

GA

Zip Code

30134

FEC ID number of contributing  
federal political committee.

Name of Employer  
U.S. Govt.

Occupation

Administrative

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

654.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 1 / 2 0 0 8

Amount of Each Receipt this Period

77.00

CONTRIBUTION

Transaction ID: SA17A.19214

C.

Full Name (Last, First, Middle Initial)

Peter Jenkins

Mailing Address

8950 Myrtle Drive

City

Douglasville

State

GA

Zip Code

30134

FEC ID number of contributing  
federal political committee.

Name of Employer  
U.S. Govt.

Occupation

Administrative

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

731.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 1 / 2 0 0 8

Amount of Each Receipt this Period

77.00

CONTRIBUTION

Transaction ID: SA17A.19455

SUBTOTAL of Receipts This Page (optional) .....

231.00

TOTAL This Period (last page this line number only) .....



# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 92

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Comeau Justin

Mailing Address

26 Joseph Street

City

Medford

State

MA

Zip Code

02155

FEC ID number of contributing  
federal political committee.

Name of Employer  
St. Ann's Home

Occupation

Child Care Worker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 7 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.18487

B.

Full Name (Last, First, Middle Initial)

Hall Kern

Mailing Address

11 Brookmeade Ct.

City

Sterling

State

VA

Zip Code

20165

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation

retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 4 / 2 0 0 8

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.19027

C.

Full Name (Last, First, Middle Initial)

Hall Kern

Mailing Address

11 Brookmeade Ct.

City

Sterling

State

VA

Zip Code

20165

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation

retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 2 / 2 0 0 8

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.19233

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 92

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

melinda mcall

Mailing Address

978 ryan road

City

florence

State

MA

Zip Code

01062

FEC ID number of contributing  
federal political committee.

Name of Employer  
four rivers charter school-  
teacher

Occupation

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.19152

B.

Full Name (Last, First, Middle Initial)

MINDEN MICHAEL

Mailing Address

P.O. BOX 490

City

VADER

State

WA

Zip Code

98593

FEC ID number of contributing  
federal political committee.

Name of Employer  
PRINTING ARTS CENTER

Occupation

PRE-PRESS MGER

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

217.75

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 8 / 2 0 0 8

Amount of Each Receipt this Period

15.00

CONTRIBUTION

Transaction ID: SA17A.18431

C.

Full Name (Last, First, Middle Initial)

Carol Mullen

Mailing Address

618 Tennyson Ave

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation

investors

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 4 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.18703

SUBTOTAL of Receipts This Page (optional) .....

515.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 92

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

James Murray

Mailing Address

1614 Clermont St

City

Denver

State

CO

Zip Code

80220

FEC ID number of contributing  
federal political committee.

Name of Employer  
Charles Schwab

Occupation

Data Entry

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

218.58

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 5 / 2 0 0 8

Amount of Each Receipt this Period

56.61

CONTRIBUTION

Transaction ID: SA17A.18544

B.

Full Name (Last, First, Middle Initial)

GURIEN NATHANIEL

Mailing Address

P.O.BOX 331

City

Kearsarge

State

NH

Zip Code

03847

FEC ID number of contributing  
federal political committee.

Name of Employer  
Entrepreneur

Occupation

HiFi Trader, Ltd.

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 1 / 2 0 0 8

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.18518

C.

Full Name (Last, First, Middle Initial)

Ikuko Nezaki

Mailing Address

21-40Kamitamari, Tamari,

City

Niihari

State

Zip Code

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.18488

SUBTOTAL of Receipts This Page (optional) .....

656.61

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 92

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)  
THERESA O'DELL

Mailing Address  
22211 SOUTH ORE ROAD

City State Zip Code  
HARRISONVILLE MO 64701

FEC ID number of contributing  
federal political committee.

Name of Employer  
USDA/Computer Specialist

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.19300

B.

Full Name (Last, First, Middle Initial)  
Hite Rosemary

Mailing Address  
77500 South 6th St.

Unit #B-18

City State Zip Code  
Cottage Grove OR 97424

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation  
Retired

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Transaction ID: SA17A.18402

C.

Full Name (Last, First, Middle Initial)  
Aaron Smith

Mailing Address  
240 E 10th St, #10A

City State Zip Code  
New York NY 10003

FEC ID number of contributing  
federal political committee.

Name of Employer  
None

Occupation  
Self-Employed

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1037.31

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Amount of Each Receipt this Period

37.31

CONTRIBUTION

Transaction ID: SA17A.19157

SUBTOTAL of Receipts This Page (optional) .....

487.31

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 92

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)  
SUREERATT SMITH

Mailing Address  
109 GLEN ECHO DR

City State Zip Code  
SMYRNA TN 37167

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 2 / 2 0 0 8

Amount of Each Receipt this Period

0.00

DONATION

Transaction ID: SA17A.4985

B.

Full Name (Last, First, Middle Initial)  
Leon Story

Mailing Address  
102 Park Street

City State Zip Code  
North Reading MA 01864

FEC ID number of contributing  
federal political committee.

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 3 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.19261

C.

Full Name (Last, First, Middle Initial)  
Nguyen-Northcott Sven

Mailing Address  
287 Winding Brook Drive

City State Zip Code  
Leonard MI 48367

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self

Occupation  
Inventor/Engineer

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 3 / 2 0 0 8

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Transaction ID: SA17A.18266

SUBTOTAL of Receipts This Page (optional) .....

550.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 92

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Bridwell Thaddeus

Mailing Address

10843 Kling St. #8

City

Toluca Lake

State

CA

Zip Code

91602

FEC ID number of contributing  
federal political committee.

Name of Employer  
Aidikoff Screening Room

Occupation

Projectionist & Photographer

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 9 / 2 0 0 8

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Transaction ID: SA17A.18494

B.

Full Name (Last, First, Middle Initial)

Thomas Thwaites

Mailing Address

1113 Centre LaneState College

City

State College

State

PA

Zip Code

16801

FEC ID number of contributing  
federal political committee.

Name of Employer  
None

Occupation

retired

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 1 3 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.18882

C.

Full Name (Last, First, Middle Initial)

MORGAN TIM

Mailing Address

616 NIKKI DVE

City

PETALUMA

State

CA

Zip Code

94954

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 1 1 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.18520

SUBTOTAL of Receipts This Page (optional) .....

700.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 92

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Dana Towle

Mailing Address

920 s 110th st

City

Edwardsville

State

KS

Zip Code

66111

FEC ID number of contributing  
federal political committee.Name of Employer  
Dana R Towle MDPC

Occupation

Hand Surgeon

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	4	/	2	0	0	8

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.19468

B.

Full Name (Last, First, Middle Initial)

YARBOROUGH TRIN

Mailing Address

833 20TH ST APT 101

City

SANTA MONICA

State

CA

Zip Code

90403

FEC ID number of contributing  
federal political committee.Name of Employer  
self

Occupation

WRITER

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	6	/	2	0	0	8

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.19605

C.

Full Name (Last, First, Middle Initial)

Aquinas Wijetunga

Mailing Address

665 St Marks Ave. Apt 4D

City

Brookline

State

NY

Zip Code

11216

FEC ID number of contributing  
federal political committee.Name of Employer  
none

Occupation

retired

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	0	/	2	0	0	8

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.19409

SUBTOTAL of Receipts This Page (optional) .....

200.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 92

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Aquinas Wijetunga

Mailing Address

665 St Marks Ave. Apt 4D

City

State

Zip Code

Brookline

NY

11216

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.19517

B.

Full Name (Last, First, Middle Initial)

Aquinas Wijetunga

Mailing Address

665 St Marks Ave. Apt 4D

City

State

Zip Code

Brookline

NY

11216

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.19568

SUBTOTAL of Receipts This Page (optional) .....

100.00

TOTAL This Period (last page this line number only) .....

16628.36



# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 92

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

AUTHORIZENET CORP

Mailing Address

915 SOUTH 500 EAST

SUITE 200

City

AMERICAN FORK

State

UT

Zip Code

84003

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4932.70

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 1 5 / 2 0 0 8

Amount of Each Receipt this Period

4932.70

DONATION DEPOSITS

Transaction ID: SA21.19803

B.

Full Name (Last, First, Middle Initial)

Paypal Inc

Mailing Address

7615 37th Ave

City

Jackson Heights

State

NY

Zip Code

11372

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

852.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 0 7 / 2 0 0 8

Amount of Each Receipt this Period

852.00

DONATIONS TRANSFER

Transaction ID: SA21.19801

SUBTOTAL of Receipts This Page (optional) .....

5784.70

TOTAL This Period (last page this line number only) .....

5784.70

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

### A. AMERICAN EXPRESS COLLECTIONS

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 731 Rocky

City HILL State NJ Zip Code 08553

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19720

Date of Disbursement

02 / 11 / 2008

Amount of Each Disbursement this Period

4.50

### B. AMERICAN EXPRESS COLLECTIONS

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 731 Rocky

City HILL State NJ Zip Code 08553

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19727

Date of Disbursement

02 / 14 / 2008

Amount of Each Disbursement this Period

22.61

### C. AMERICAN EXPRESS COLLECTIONS

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 731 Rocky

City HILL State NJ Zip Code 08553

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19769

Date of Disbursement

03 / 11 / 2008

Amount of Each Disbursement this Period

4.50

SUBTOTAL of Disbursements This Page (optional) .....

31.61

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

### A. AMERICAN EXPRESS COLLECTIONS

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 731 Rocky

City HILL State NJ Zip Code 08553

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19772

Date of Disbursement

03 / 14 / 2008

Amount of Each Disbursement this Period

9.61

### B. AMTRAK INTERCITY

Full Name (Last, First, Middle Initial)

Mailing Address 110 Callahan Drive,

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19721

Date of Disbursement

02 / 13 / 2008

Amount of Each Disbursement this Period

118.30

### C. AMTRAK INTERCITY

Full Name (Last, First, Middle Initial)

Mailing Address 110 Callahan Drive,

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19722

Date of Disbursement

02 / 13 / 2008

Amount of Each Disbursement this Period

98.00

SUBTOTAL of Disbursements This Page (optional) .....

225.91

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) AMTRAK INTERCITY	<b>Transaction ID:</b> SB23.19753 <b>Date of Disbursement</b>
Mailing Address 110 Callahan Drive,	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 8</div> </div>
City Alexandria State VA Zip Code 22301	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement TRAVEL EXPENSES	<div>268.90</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) AT&T MOBILITY	<b>Transaction ID:</b> SB23.19687 <b>Date of Disbursement</b>
Mailing Address PO BOX 6463	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 1 / 2 0 0 8</div> </div>
City CAROL STREAM State IL Zip Code 60197	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement TELEPHONE/INTERNET	<div>350.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) AUBURN QUAD, INC.	<b>Transaction ID:</b> SB23.19799 <b>Date of Disbursement</b>
Mailing Address P.O. BOX 390728	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 8</div> </div>
City CAMBRIDGE State MA Zip Code 02139	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement ACT BLUE MERCHANT FEES	<div>7.92</div>
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<div>101 Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

627.32

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) AUTHORIZENET CORP</p> <p>Mailing Address 915 SOUTH 500 EAST SUITE 200</p> <p>City AMERICAN FORK State UT Zip Code 84003</p> <p>Purpose of Disbursement CREDIT CARD MERCHANT PROCESSING FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.19621</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 85.90</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) AUTHORIZENET CORP</p> <p>Mailing Address 915 SOUTH 500 EAST SUITE 200</p> <p>City AMERICAN FORK State UT Zip Code 84003</p> <p>Purpose of Disbursement CREDIT CARD MERCHANT PROCESSING FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.19700</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 82.90</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) AUTHORIZENET CORP</p> <p>Mailing Address 915 SOUTH 500 EAST SUITE 200</p> <p>City AMERICAN FORK State UT Zip Code 84003</p> <p>Purpose of Disbursement CREDIT CARD MERCHANT PROCESSING FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.19759</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 71.70</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

240.50

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Petherick Chris	<b>Transaction ID:</b> SB23.19735 <b>Date of Disbursement</b>																				
Mailing Address 16305 Woodville Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	2		2	0	0	8												
City Brandywine State MD Zip Code 20613 Purpose of Disbursement CONSULTING CAMPAIGN MAGT Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <table border="1"> <tr> <td>101</td> </tr> </table>	101																			
101																					
<b>B.</b> Full Name (Last, First, Middle Initial) CINGULAR WIRELESS	<b>Transaction ID:</b> SB23.19622 <b>Date of Disbursement</b>																				
Mailing Address P.O.BOX 6463	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	0	8												
City CAROL STREAM State IL Zip Code 60197 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>80.32</td> </tr> </table>	80.32																			
80.32																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <table border="1"> <tr> <td></td> </tr> </table>																				
<b>C.</b> Full Name (Last, First, Middle Initial) CINGULAR WIRELESS	<b>Transaction ID:</b> SB23.19637 <b>Date of Disbursement</b>																				
Mailing Address P.O.BOX 6463	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	7		2	0	0	8												
City CAROL STREAM State IL Zip Code 60197 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>22.31</td> </tr> </table>	22.31																			
22.31																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <table border="1"> <tr> <td></td> </tr> </table>																				

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1602.63

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) CINGULAR WIRELESS Mailing Address P.O.BOX 6463	<b>Transaction ID:</b> SB23.19708 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 6 / 2 0 0 8</div> </div>
City State Zip Code CAROL STREAM IL 60197 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>4.31</div>
<b>B.</b> Full Name (Last, First, Middle Initial) CINGULAR WIRELESS Mailing Address P.O.BOX 6463 City State Zip Code CAROL STREAM IL 60197 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB23.19750 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 7 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>179.14</div>
<b>C.</b> Full Name (Last, First, Middle Initial) CINGULAR WIRELESS Mailing Address P.O.BOX 6463 City State Zip Code CAROL STREAM IL 60197 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB23.19782 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 7 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>181.41</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

364.86

**TOTAL** This Period (last page this line number only) ..... ►



# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)  
COMCAST OF ALEXANDRIA

Mailing Address 508-D S VAN DON ST

City ALEXANDRIA State VA Zip Code 04612

Purpose of Disbursement  
TELEPHONE/INTERNET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19631

Date of Disbursement

/   /

Amount of Each Disbursement this Period

188.69

B.

Full Name (Last, First, Middle Initial)  
CONSTANT CONTACT

Mailing Address Reservoir Place 1601 Trapelo Road  
Suite 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
TELEPHONE/INTERNET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19677

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

C.

Full Name (Last, First, Middle Initial)  
CONSTANT CONTACT

Mailing Address Reservoir Place 1601 Trapelo Road  
Suite 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
TELEPHONE/INTERNET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19741

Date of Disbursement

/   /

Amount of Each Disbursement this Period

155.00

SUBTOTAL of Disbursements This Page (optional) .....

373.69

TOTAL This Period (last page this line number only) .....

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

State:  District:

FEC Schedule B ( Form 3P)

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) DELTA AIR Mailing Address P.O. Box 20532	<b>Transaction ID:</b> SB23.19679 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 5 / 2 0 0 8</div> </div>
City Atlanta State GA Zip Code 30320 Purpose of Disbursement TRAVEL EXPENSES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>190.01</div>
<b>B.</b> Full Name (Last, First, Middle Initial) DHLWSH Mailing Address 333 TWIN DOLPHIN DR City REDWOOD State CA Zip Code 94065 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19689 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>206.15</div>
<b>C.</b> Full Name (Last, First, Middle Initial) DHLWSH Mailing Address 333 TWIN DOLPHIN DR City REDWOOD State CA Zip Code 94065 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19690 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>176.64</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

572.80

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) DHLWSH Mailing Address 333 TWIN DOLPHIN DR	<b>Transaction ID:</b> SB23.19692 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8	
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	1		2	0	0	8													
City REDWOOD State CA Zip Code 94065 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>137.73</td> </tr> </table>	137.73																				
137.73																						
<b>B.</b> Full Name (Last, First, Middle Initial) DHLWSH Mailing Address 333 TWIN DOLPHIN DR City REDWOOD State CA Zip Code 94065 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19694 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>34.52</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8	34.52
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	1		2	0	0	8													
34.52																						
<b>C.</b> Full Name (Last, First, Middle Initial) DHLWSH Mailing Address 333 TWIN DOLPHIN DR City REDWOOD State CA Zip Code 94065 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19712 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>177.29</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	8		2	0	0	8	177.29
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	8		2	0	0	8													
177.29																						

**SUBTOTAL** of Disbursements This Page (optional) .....

349.54

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) DHLWSH	<b>Transaction ID:</b> SB23.19740 <b>Date of Disbursement</b>																				
Mailing Address 333 TWIN DOLPHIN DR	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	5		2	0	0	8												
City REDWOOD State CA Zip Code 94065	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement POSTAGE	<table border="1"> <tr> <td>263.63</td> </tr> </table>	263.63																			
263.63																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) DHLWSH	<b>Transaction ID:</b> SB23.19742 <b>Date of Disbursement</b>																				
Mailing Address 333 TWIN DOLPHIN DR	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	5		2	0	0	8												
City REDWOOD State CA Zip Code 94065	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement POSTAGE	<table border="1"> <tr> <td>83.17</td> </tr> </table>	83.17																			
83.17																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) DHLWSH	<b>Transaction ID:</b> SB23.19743 <b>Date of Disbursement</b>																				
Mailing Address 333 TWIN DOLPHIN DR	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	5		2	0	0	8												
City REDWOOD State CA Zip Code 94065	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement POSTAGE	<table border="1"> <tr> <td>62.55</td> </tr> </table>	62.55																			
62.55																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**409.35**

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

DHLWSH

Mailing Address 333 TWIN DOLPHIN DR

City REDWOOD State CA Zip Code 94065

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19744

Date of Disbursement

/   /

Amount of Each Disbursement this Period

40.07

B.

Full Name (Last, First, Middle Initial)

DHLWSH

Mailing Address 333 TWIN DOLPHIN DR

City REDWOOD State CA Zip Code 94065

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19745

Date of Disbursement

/   /

Amount of Each Disbursement this Period

38.15

C.

Full Name (Last, First, Middle Initial)

DHLWSH

Mailing Address 333 TWIN DOLPHIN DR

City REDWOOD State CA Zip Code 94065

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19747

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8.31

SUBTOTAL of Disbursements This Page (optional) .....

86.53

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) DHLWSH Mailing Address 333 TWIN DOLPHIN DR	<b>Transaction ID:</b> SB23.19783 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 8 / 2 0 0 8</div> </div>
City REDWOOD State CA Zip Code 94065 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>225.16</div>
<b>B.</b> Full Name (Last, First, Middle Initial) DHLWSH Mailing Address 333 TWIN DOLPHIN DR City REDWOOD State CA Zip Code 94065 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19784 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 8 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>172.01</div>
<b>C.</b> Full Name (Last, First, Middle Initial) DHLWSH Mailing Address 333 TWIN DOLPHIN DR City REDWOOD State CA Zip Code 94065 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19786 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 8 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>84.89</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

482.06

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) ISRAEL ELEONAI	<b>Transaction ID:</b> SB23.19728 <b>Date of Disbursement</b>																				
Mailing Address 675 HENNESSY WAY	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	5		2	0	0	8												
City BOWLING GREEN State KY Zip Code 42101	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CONSULTING FEES COMMUNICATIONS	<table border="1"> <tr> <td>236.00</td> </tr> </table>	236.00																			
236.00																					
Candidate Name	<table border="1"> <tr> <td>101</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	101	Category/ Type																		
101																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) FOUR POINTS SHERATON	<b>Transaction ID:</b> SB23.19703 <b>Date of Disbursement</b>																				
Mailing Address 9750 AIRPORT BLVD	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	5		2	0	0	8												
City LOS ANGELES State CA Zip Code 90045	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>722.31</td> </tr> </table>	722.31																			
722.31																					
Candidate Name	<table border="1"> <tr> <td></td> </tr> <tr> <td>Category/ Type</td> </tr> </table>		Category/ Type																		
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) GULF 9180	<b>Transaction ID:</b> SB23.19653 <b>Date of Disbursement</b>																				
Mailing Address 9180 Gulf Beach Hwy	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	4		2	0	0	8												
City Pensacola State FL Zip Code 32507	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>75.00</td> </tr> </table>	75.00																			
75.00																					
Candidate Name	<table border="1"> <tr> <td></td> </tr> <tr> <td>Category/ Type</td> </tr> </table>		Category/ Type																		
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1033.31

**TOTAL** This Period (last page this line number only) .....



# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) GULF 9180	<b>Transaction ID:</b> SB23.19657 <b>Date of Disbursement</b>																				
Mailing Address 9180 Gulf Beach Hwy	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	4		2	0	0	8												
City Pensacola State FL Zip Code 32507	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td colspan="10">18.18</td> </tr> </table>	18.18																			
18.18																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) GULF 9180	<b>Transaction ID:</b> SB23.19658 <b>Date of Disbursement</b>																				
Mailing Address 9180 Gulf Beach Hwy	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	4		2	0	0	8												
City Pensacola State FL Zip Code 32507	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td colspan="10">16.97</td> </tr> </table>	16.97																			
16.97																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) HANNAFORD BROS CO	<b>Transaction ID:</b> SB23.19610 <b>Date of Disbursement</b>																				
Mailing Address PO BOX 1000	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	2		2	0	0	8												
City Portland State ME Zip Code 04104	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td colspan="10">113.22</td> </tr> </table>	113.22																			
113.22																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

148.37

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) HANNAFORD BROS CO Mailing Address PO BOX 1000	<b>Transaction ID:</b> SB23.19616 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 2 / 2 0 0 8</div> </div>
City Portland State ME Zip Code 04104 Purpose of Disbursement TRAVEL EXPENSES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>33.20</div>
<b>B.</b> Full Name (Last, First, Middle Initial) HANNAFORD BROS CO Mailing Address PO BOX 1000 City Portland State ME Zip Code 04104 Purpose of Disbursement TRAVEL EXPENSES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19625 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>66.83</div>
<b>C.</b> Full Name (Last, First, Middle Initial) HOTELSCOM Mailing Address 10440 N. Central Expwy Ste. 400 City Dallas State TX Zip Code 75231 Purpose of Disbursement TRAVEL EXPENSES Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19790 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>825.54</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

925.57

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) IKON-MID ATLANTIC	<b>Transaction ID:</b> SB23.19660 <b>Date of Disbursement</b>																				
Mailing Address PO Box 827119	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Manchester State NH Zip Code 03101	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>3</td><td>1</td><td>8</td><td>.</td><td>5</td><td>2</td> </tr> </table>	3	1	8	.	5	2														
3	1	8	.	5	2																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Eleonai Israel	<b>Transaction ID:</b> SB23.19652 <b>Date of Disbursement</b>																				
Mailing Address 675 Hennessy Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	4		2	0	0	8												
City Bowling Green State KY Zip Code 42101	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TENT RENTAL	<table border="1"> <tr> <td>5</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	5	0	0	.	0	0														
5	0	0	.	0	0																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Eleonai Israel	<b>Transaction ID:</b> SB23.19673 <b>Date of Disbursement</b>																				
Mailing Address 675 Hennessy Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	3		2	0	0	8												
City Bowling Green State KY Zip Code 42101	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CONSULTING FEES COMMUNICATIONS	<table border="1"> <tr> <td>5</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	5	0	0	.	0	0														
5	0	0	.	0	0																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1318.52

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)  
ELLIOT JACOBSON

Mailing Address 1101 3RD STREET, SW  
APT201

City WASHINGTON State DC Zip Code 20021

Purpose of Disbursement  
CONSULTING FUND RAISING

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB23.19748

Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

3000.00

B.

Full Name (Last, First, Middle Initial)  
RODRIGUEZ JOSE

Mailing Address 1435 MONROE ST NW

City WASHINGTON State DC Zip Code 20010

Purpose of Disbursement  
CONSULTING CAMPAIGN COORDINATION

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB23.19644

Date of Disbursement

01 / 09 / 2008

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)  
RODRIGUEZ JOSE

Mailing Address 1435 MONROE ST NW

City WASHINGTON State DC Zip Code 20010

Purpose of Disbursement  
CONSULTING CAMPAIGN MAGT

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB23.19709

Date of Disbursement

02 / 07 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

5000.00

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) RODRIGUEZ JOSE	<b>Transaction ID:</b> SB23.19734 <b>Date of Disbursement</b>																				
Mailing Address 1435 MONROE ST NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	2		2	0	0	8												
City WASHINGTON State DC Zip Code 20010	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CONSULTING CAMPAIGN COORDINATION	<table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) ELEANOR JUSTICE	<b>Transaction ID:</b> SB23.19681 <b>Date of Disbursement</b>																				
Mailing Address 801 CHAUNCEY AVENUE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	8		2	0	0	8												
City BALTIMORE State MD Zip Code 21217	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) KG INTERNATIONAL	<b>Transaction ID:</b> SB23.19733 <b>Date of Disbursement</b>																				
Mailing Address 11311 TRENTON CT	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	2		2	0	0	8												
City BRISTOW State VA Zip Code 20136	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CONSULTING ACCOUNTING	<table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name	<table border="1"> <tr> <td></td> </tr> </table> Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

4250.00

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 46 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

MEDIA TEMPLE INCORPORATED

Mailing Address 8520 National Blvd. Building A

City Culver City State CA Zip Code 90232

Purpose of Disbursement  
MEDIA EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19656

Date of Disbursement

01 / 14 / 2008

Amount of Each Disbursement this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MEDIA TEMPLE INCORPORATED

Mailing Address 8520 National Blvd. Building A

City Culver City State CA Zip Code 90232

Purpose of Disbursement  
MEDIA EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19719

Date of Disbursement

02 / 11 / 2008

Amount of Each Disbursement this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MEDIA TEMPLE INCORPORATED

Mailing Address 8520 National Blvd. Building A

City Culver City State CA Zip Code 90232

Purpose of Disbursement  
MEDIA EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19774

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

40.00

SUBTOTAL of Disbursements This Page (optional) .....

120.00

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 47 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)  
NOVA INFORMATION SYSTEMS

Mailing Address One Concourse Pkwy  
Suite 300

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19613

Date of Disbursement

01 / 02 / 2008

Amount of Each Disbursement this Period

60.00

B.

Full Name (Last, First, Middle Initial)  
NOVA INFORMATION SYSTEMS

Mailing Address One Concourse Pkwy  
Suite 300

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19693

Date of Disbursement

02 / 01 / 2008

Amount of Each Disbursement this Period

60.00

C.

Full Name (Last, First, Middle Initial)  
NOVA INFORMATION SYSTEMS

Mailing Address One Concourse Pkwy  
Suite 300

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19755

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

60.00

SUBTOTAL of Disbursements This Page (optional) ▶

180.00

TOTAL This Period (last page this line number only) ▶

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 48 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) PERCEIVA Mailing Address 5300 Palmer Lane	<b>Transaction ID:</b> SB23.19746 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 5 / 2 0 0 8</div> </div>
City Williamsburg State VA Zip Code 23188 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>18.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) PERCEIVA Mailing Address 5300 Palmer Lane City Williamsburg State VA Zip Code 23188 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19779 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>18.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) CHRIS PETHRICK Mailing Address 16305 WOODVILLE ROAD City BRANDYWINE State MD Zip Code 20613 Purpose of Disbursement CONSULTING CAMPAIGN MAGT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19678 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2500.00</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

2536.00

**TOTAL** This Period (last page this line number only) ..... ►



# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 49 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Puritan Backroom Restaurant

Mailing Address 245 Hookset Rd

City  
Manchestor

State  
NH

Zip Code  
03104

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19617

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.05

B.

Full Name (Last, First, Middle Initial)

ELLEN REYNOLDS

Mailing Address 7 ROBINSON LANE

City  
MOUNT PRESENT

State  
ME

Zip Code  
04660

Purpose of Disbursement  
RENTAL NH

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19666

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4488.00

C.

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address 156 Mescal Loop

City  
Lake Havasu City

State  
AZ

Zip Code  
86403

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19683

Date of Disbursement

/   /

Amount of Each Disbursement this Period

163.00

SUBTOTAL of Disbursements This Page (optional) .....

4671.05

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	<b>Transaction ID:</b> SB23.19688 <b>Date of Disbursement</b>																				
Mailing Address 156 Mescal Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		3	1		2	0	0	8												
City Lake Havasu City State AZ Zip Code 86403	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>188.00</td> </tr> </table>																				188.00
									188.00												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	<b>Transaction ID:</b> SB23.19699 <b>Date of Disbursement</b>																				
Mailing Address 156 Mescal Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	4		2	0	0	8												
City Lake Havasu City State AZ Zip Code 86403	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>97.50</td> </tr> </table>																				97.50
									97.50												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	<b>Transaction ID:</b> SB23.19710 <b>Date of Disbursement</b>																				
Mailing Address 156 Mescal Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	7		2	0	0	8												
City Lake Havasu City State AZ Zip Code 86403	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>186.00</td> </tr> </table>																				186.00
									186.00												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**471.50**

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 51 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	<b>Transaction ID:</b> SB23.19711 <b>Date of Disbursement</b>
Mailing Address 156 Mescal Loop	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 7 / 2 0 0 8</div> </div>
City State Zip Code Lake Havasu City AZ 86403 Purpose of Disbursement TRAVEL EXPENSES Candidate Name	Amount of Each Disbursement this Period <div>97.50</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) SPIRIT AIR	<b>Transaction ID:</b> SB23.19691 <b>Date of Disbursement</b>
Mailing Address 2800 Executive Way	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 8</div> </div>
City State Zip Code MIRAMAR FL 33025 Purpose of Disbursement TRAVEL EXPENSES Candidate Name	Amount of Each Disbursement this Period <div>159.50</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> SB23.19611 <b>Date of Disbursement</b>
Mailing Address 910 North Glebe Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 2 / 2 0 0 8</div> </div>
City State Zip Code Arlington VA 22203 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name	Amount of Each Disbursement this Period <div>90.23</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

347.23

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 52 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> SB23.19612 <b>Date of Disbursement</b>																				
Mailing Address 910 North Glebe Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	2		2	0	0	8												
City Arlington State VA Zip Code 22203	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td>76.92</td> </tr> </table>	76.92																			
76.92																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> SB23.19626 <b>Date of Disbursement</b>																				
Mailing Address 910 North Glebe Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	0	8												
City Arlington State VA Zip Code 22203	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td>33.77</td> </tr> </table>	33.77																			
33.77																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) SUNOCO	<b>Transaction ID:</b> SB23.19651 <b>Date of Disbursement</b>																				
Mailing Address 193 Hartford Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	1		2	0	0	8												
City Bellingham State MA Zip Code 02019	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>21.88</td> </tr> </table>	21.88																			
21.88																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

132.57

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 53 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) SUNOCO	<b>Transaction ID:</b> SB23.19655 <b>Date of Disbursement</b>																				
Mailing Address 193 Hartford Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	4		2	0	0	8												
City Bellingham State MA Zip Code 02019 Purpose of Disbursement TRAVEL EXPENSES Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>43.84</td> </tr> </table>	43.84																			
43.84																					
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<b>B.</b> Full Name (Last, First, Middle Initial) Travel City	<b>Transaction ID:</b> SB23.19665 <b>Date of Disbursement</b>																				
Mailing Address 1712 N Frazier St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	7		2	0	0	8												
City Conroe State TX Zip Code 77301 Purpose of Disbursement TRAVEL EXPENSES Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>6.00</td> </tr> </table>	6.00																			
6.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) TROY ASSOCIATES	<b>Transaction ID:</b> SB23.19640 <b>Date of Disbursement</b>																				
Mailing Address 1916 Wilson Boulevard	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	0	8												
City Arlington, State VA Zip Code 22201 Purpose of Disbursement RENTAL HQT Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>2982.33</td> </tr> </table>	2982.33																			
2982.33																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

3032.17

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 54 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) US AIRWAYS	<b>Transaction ID:</b> SB23.19664 <b>Date of Disbursement</b>																				
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M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	7		2	0	0	8												
City ARLINGTON State VA Zip Code 22227	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>189.00</td> </tr> </table>																				189.00
									189.00												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) US AIRWAYS	<b>Transaction ID:</b> SB23.19724 <b>Date of Disbursement</b>																				
Mailing Address 2345 CRYSTAL DVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	4		2	0	0	8												
City ARLINGTON State VA Zip Code 22227	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>223.50</td> </tr> </table>																				223.50
									223.50												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) VERIZON WIRELESS	<b>Transaction ID:</b> SB23.19620 <b>Date of Disbursement</b>																				
Mailing Address 4238 Wilson Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	0	8												
City Arlington State VA Zip Code 22203	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TELEPHONE/INTERNET	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>97.69</td> </tr> </table>																				97.69
									97.69												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**510.19**

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 55 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) VONAGE USA	<b>Transaction ID:</b> SB23.19645 <b>Date of Disbursement</b>																				
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M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	9		2	0	0	8												
City Holmdel State NJ Zip Code 07733	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TELEPHONE/INTERNET	<table border="1"> <tr> <td colspan="10">59.41</td> </tr> </table>	59.41																			
59.41																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) VONAGE USA	<b>Transaction ID:</b> SB23.19684 <b>Date of Disbursement</b>																				
Mailing Address 23 Main St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	8		2	0	0	8												
City Holmdel State NJ Zip Code 07733	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TELEPHONE/INTERNET	<table border="1"> <tr> <td colspan="10">51.11</td> </tr> </table>	51.11																			
51.11																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) VONAGE USA	<b>Transaction ID:</b> SB23.19715 <b>Date of Disbursement</b>																				
Mailing Address 23 Main St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	1		2	0	0	8												
City Holmdel State NJ Zip Code 07733	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TELEPHONE/INTERNET	<table border="1"> <tr> <td colspan="10">59.41</td> </tr> </table>	59.41																			
59.41																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

169.93

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 56 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) VONAGE USA <hr/> Mailing Address 23 Main St. <hr/> <table> <tr> <td>City Holmdel</td> <td>State NJ</td> <td>Zip Code 07733</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement TELEPHONE/INTERNET</td> <td rowspan="2"><div>Category/ Type</div></td> </tr> <tr> <td>Candidate Name</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	City Holmdel	State NJ	Zip Code 07733	Purpose of Disbursement TELEPHONE/INTERNET	<div>Category/ Type</div>	Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		<b>Transaction ID:</b> SB23.19751 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 7 / 2 0 0 8</div> </div> <hr/> <b>Amount of Each Disbursement this Period</b> <div>51.11</div>
City Holmdel	State NJ	Zip Code 07733									
Purpose of Disbursement TELEPHONE/INTERNET	<div>Category/ Type</div>										
Candidate Name											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼										
State: District:											
<b>B.</b> Full Name (Last, First, Middle Initial) VONAGE USA <hr/> Mailing Address 23 Main St. <hr/> <table> <tr> <td>City Holmdel</td> <td>State NJ</td> <td>Zip Code 07733</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement TELEPHONE/INTERNET</td> <td rowspan="2"><div>Category/ Type</div></td> </tr> <tr> <td>Candidate Name</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	City Holmdel	State NJ	Zip Code 07733	Purpose of Disbursement TELEPHONE/INTERNET	<div>Category/ Type</div>	Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		<b>Transaction ID:</b> SB23.19780 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 8</div> </div> <hr/> <b>Amount of Each Disbursement this Period</b> <div>59.41</div>
City Holmdel	State NJ	Zip Code 07733									
Purpose of Disbursement TELEPHONE/INTERNET	<div>Category/ Type</div>										
Candidate Name											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼										
State: District:											
<b>C.</b> Full Name (Last, First, Middle Initial) VONAGE USA <hr/> Mailing Address 23 Main St. <hr/> <table> <tr> <td>City Holmdel</td> <td>State NJ</td> <td>Zip Code 07733</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement TELEPHONE/INTERNET</td> <td rowspan="2"><div>Category/ Type</div></td> </tr> <tr> <td>Candidate Name</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	City Holmdel	State NJ	Zip Code 07733	Purpose of Disbursement TELEPHONE/INTERNET	<div>Category/ Type</div>	Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		<b>Transaction ID:</b> SB23.19781 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 8</div> </div> <hr/> <b>Amount of Each Disbursement this Period</b> <div>51.11</div>
City Holmdel	State NJ	Zip Code 07733									
Purpose of Disbursement TELEPHONE/INTERNET	<div>Category/ Type</div>										
Candidate Name											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼										
State: District:											

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

161.63

**TOTAL** This Period (last page this line number only) ..... ►



# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 57 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	<b>Transaction ID:</b> SB23.19619 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 3 / 2 0 0 8</div> </div>
City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>875.30</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19649 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 0 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>19.50</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19672 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>10.00</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

904.80

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 58 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Wachovia Bank	<b>Transaction ID:</b> SB23.19675 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	3		2	0	0	8												
City Charlotte State NC Zip Code 28262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td colspan="10">10.02</td> </tr> </table>	10.02																			
10.02																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Wachovia Bank	<b>Transaction ID:</b> SB23.19676 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	3		2	0	0	8												
City Charlotte State NC Zip Code 28262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td colspan="10">10.02</td> </tr> </table>	10.02																			
10.02																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Wachovia Bank	<b>Transaction ID:</b> SB23.19680 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	5		2	0	0	8												
City Charlotte State NC Zip Code 28262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td colspan="10">10.10</td> </tr> </table>	10.10																			
10.10																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

30.14

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	<b>Transaction ID:</b> SB23.19682 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 8 / 2 0 0 8</div> </div>
City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>190.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19685 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 8 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>10.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19686 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 0 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>9.41</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

209.41

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 60 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	<b>Transaction ID:</b> SB23.19696 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	4		2	0	0	8	
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	4		2	0	0	8													
City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>555.07</td> </tr> </table>	555.07																				
555.07																						
<b>B.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19707 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>10.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	0	8	10.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	6		2	0	0	8													
10.00																						
<b>C.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19723 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>12.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	8	12.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	3		2	0	0	8													
12.00																						

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

577.07

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 61 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City Charlotte State NC Zip Code 28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19731

Date of Disbursement

02 / 20 / 2008

Amount of Each Disbursement this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City Charlotte State NC Zip Code 28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19732

Date of Disbursement

02 / 20 / 2008

Amount of Each Disbursement this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City Charlotte State NC Zip Code 28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19739

Date of Disbursement

02 / 25 / 2008

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

520.00

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 62 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	<b>Transaction ID:</b> SB23.19749 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 6 / 2 0 0 8</div> </div>
City Charlotte State NC Zip Code 28262 Purpose of Disbursement OVERDRAFT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>35.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement OVERDRAFT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19752 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 7 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>70.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement OVERDRAFT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19754 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>35.00</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

140.00

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 63 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	<b>Transaction ID:</b> SB23.19757 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 0 8</div> </div>
City Charlotte State NC Zip Code 28262 Purpose of Disbursement OVERDRAFT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>70.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19758 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>529.87</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19760 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>10.00</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

609.87

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 64 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	<b>Transaction ID:</b> SB23.19762 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 0 8</div> </div>
City Charlotte State NC Zip Code 28262 Purpose of Disbursement OVERDRAFT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>140.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19763 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>10.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19764 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>10.00</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

160.00

**TOTAL** This Period (last page this line number only) ..... ►



# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 65 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Wachovia Bank	<b>Transaction ID:</b> SB23.19765 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	8												
City Charlotte State NC Zip Code 28262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td>10.00</td> </tr> </table>	10.00																			
10.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Wachovia Bank	<b>Transaction ID:</b> SB23.19766 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	8												
City Charlotte State NC Zip Code 28262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td>5.00</td> </tr> </table>	5.00																			
5.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Wachovia Bank	<b>Transaction ID:</b> SB23.19767 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	8												
City Charlotte State NC Zip Code 28262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement OVERDRAFT FEE	<table border="1"> <tr> <td>140.00</td> </tr> </table>	140.00																			
140.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

155.00

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 66 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	<b>Transaction ID:</b> SB23.19768 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div>
City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>10.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19770 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>13.15</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement OVERDRAFT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19771 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>70.00</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

93.15

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 67 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	<b>Transaction ID:</b> SB23.19773 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	4		2	0	0	8	
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	4		2	0	0	8													
City Charlotte State NC Zip Code 28262 Purpose of Disbursement OVERDRAFT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>35.00</td> </tr> </table>	35.00																				
35.00																						
<b>B.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement OVERDRAFT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19775 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>35.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	8	35.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	7		2	0	0	8													
35.00																						
<b>C.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.19776 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	0	8	500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	8		2	0	0	8													
500.00																						

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

570.00

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 68 / 92

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Wachovia Bank	<b>Transaction ID:</b> SB23.19777 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	8		2	0	0	8												
City Charlotte State NC Zip Code 28262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement OVERDRAFT FEE	<table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table>	25.00																			
25.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) ZORGO PRINTING SERVICE INC	<b>Transaction ID:</b> SB23.19663 <b>Date of Disbursement</b>																				
Mailing Address 131 North Main Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	7		2	0	0	8												
City Pittston State PA Zip Code 18640	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td colspan="10">2147.00</td> </tr> </table>	2147.00																			
2147.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) ZORGO PRINTING SERVICE INC	<b>Transaction ID:</b> SB23.19738 <b>Date of Disbursement</b>																				
Mailing Address 131 North Main Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	5		2	0	0	8												
City Pittston State PA Zip Code 18640	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td colspan="10">1558.75</td> </tr> </table>	1558.75																			
1558.75																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

3730.75

**TOTAL** This Period (last page this line number only) ..... ►

38814.55

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 69 / 92

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4621

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

30000.00

Cumulative Payment To Date

20900.00

Balance Outstanding at Close of This Period

9100.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 7D D  
2 4Y Y Y Y  
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

9100.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 70 / 92

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4629

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

3000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 7D D  
2 4Y Y Y Y  
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

3000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 71 / 92

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4622

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 9D D  
2 7Y Y Y Y  
2 0 0 6

12/31/2006

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

15000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 72 / 92

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4623

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 9D D  
2 7Y Y Y Y  
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

100.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 73 / 92

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4726

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 0D D  
2 5Y Y Y Y  
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

5000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 74 / 92

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4743

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

6000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 1D D  
3 0Y Y Y Y  
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

6000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 75 / 92

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4744

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 2D D  
1 8Y Y Y Y  
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

5000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 76 / 92

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5215

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

806.74

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

806.74

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
0 7Y Y Y Y  
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

806.74

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 77 / 92

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5217

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

181.87

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

181.87

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
0 7Y Y Y Y  
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

181.87

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 78 / 92

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5220

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

95.70

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

95.70

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
2 3Y Y Y Y  
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

95.70

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 79 / 92

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5216

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

1500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1500.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
2 5Y Y Y Y  
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

1500.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 80 / 92

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5219

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

43.59

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

43.59

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
2 6Y Y Y Y  
2 0 0 7

12/31/2008

0.0000 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

43.59

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 81 / 92

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5221

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
2 8Y Y Y Y  
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

1000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 82 / 92

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5218

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

787.83

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

787.83

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 3D D  
0 8Y Y Y Y  
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

787.83

**TOTALS** This Period (last page in this line only) ▶

47615.73

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 83 / 92

FOR LINE NUMBER:  
(check only one)☒ 11  
☐ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AUTHORIZENET CORPNature of Debt (Purpose):  
donations not depositedMailing Address 915 SOUTH 500 EAST  
SUITE 200City State ZIP Code  
AMERICAN FORK UT 84003

Outstanding Balance Beginning This Period

4932.70

Transaction ID: SD11.18240

Amount Incurred This Period

0.00

Payment This Period

4932.70

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AUTHORIZENET CORPNature of Debt (Purpose):  
DONATIONS NOT TRANSFERREDMailing Address 915 SOUTH 500 EAST  
SUITE 200City State ZIP Code  
AMERICAN FORK UT 84003

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD11.19805

Amount Incurred This Period

3833.01

Payment This Period

0.00

Outstanding Balance at Close of This Period

3833.01

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Paypal IncNature of Debt (Purpose):  
donations not deposited

Mailing Address 7615 37th Ave

City State ZIP Code  
Jackson Heights NY 11372

Outstanding Balance Beginning This Period

852.00

Transaction ID: SD11.18239

Amount Incurred This Period

0.00

Payment This Period

852.00

Outstanding Balance at Close of This Period

0.00

**1) SUBTOTALS** This Period This Page (optional).....

3833.01

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 84 / 92

FOR LINE NUMBER:  
(check only one)

<input checked="checked" type="checkbox"/>	11
<input type="checkbox"/>	12

NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Paypal Inc

Nature of Debt (Purpose):  
DONATIONS NOT TRANSFERRED

Mailing Address 7615 37th Ave

City	State	ZIP Code
Jackson Heights	NY	11372

Outstanding Balance Beginning This Period

0.00

**Transaction ID:** SD11.19804

Amount Incurred This Period

375.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

375.00

**1) SUBTOTALS** This Period This Page (optional).....

375.00

**2) TOTALS** This Period (last page this line number only).....

4208.01

**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

4208.01

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

PAGE 85 / 92

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
JOHN CROSSNature of Debt (Purpose):  
CONSULTING

Mailing Address 2343 DAGGETT AVE

City State ZIP Code  
BATTON ROUGE CA 70808

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.19791

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WHITNEY GRAVELNature of Debt (Purpose):  
EXPENSE REIMBURSEMENT

Mailing Address 1600 N. OAK ST

City State ZIP Code  
ARLINGTON VA 22209

Outstanding Balance Beginning This Period

193.32

Transaction ID: SD12.13421

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

193.32

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Augustine GyamfiNature of Debt (Purpose):  
EXPENSE REIMBURSEMENT

Mailing Address 11311 Trenton Ct

City State ZIP Code  
Bristow VA 20136

Outstanding Balance Beginning This Period

24.00

Transaction ID: SD12.13461

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

24.00

1) **SUBTOTALS** This Period This Page (optional).....

3217.32

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

PAGE 86 / 92

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MINDI IDENNature of Debt (Purpose):  
CONSULTING CAMPAIGN COORD-  
INATION

Mailing Address 149 S. Barrington Ave. #326

City State ZIP Code  
LOS ANGELES CA 90049

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.19797

Amount Incurred This Period

1500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ELLIOT JACOBSONNature of Debt (Purpose):  
CONSULTING FEE - FUNDRAIS-  
INGMailing Address 1101 3RD STREET, SW  
APT201City State ZIP Code  
WASHINGTON DC 20021

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.13422

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
RODRIGUEZ JOSENature of Debt (Purpose):  
CONSULTING

Mailing Address 1435 MONROE ST NW

City State ZIP Code  
WASHINGTON DC 20010

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.19794

Amount Incurred This Period

2000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional).....

6500.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

PAGE 87 / 92

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 KG INTERNATIONAL

 Nature of Debt (Purpose):  
 ACCOUNTING CONSULTING

Mailing Address 11311 TRENTON CT

City	State	ZIP Code
BRISTOW	VA	20136

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.18205

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 KG INTERNATIONAL

 Nature of Debt (Purpose):  
 ACCOUNTING CONSULTING

Mailing Address 11311 TRENTON CT

City	State	ZIP Code
BRISTOW	VA	20136

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.18206

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 KG INTERNATIONAL

 Nature of Debt (Purpose):  
 CONSULTING ACCOUNTING

Mailing Address 11311 TRENTON CT

City	State	ZIP Code
BRISTOW	VA	20136

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.19795

Amount Incurred This Period

4500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4500.00

1) **SUBTOTALS** This Period This Page (optional).....

9500.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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PAGE 88 / 92

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
mosier lynneNature of Debt (Purpose):  
CONSULTING

Mailing Address 76 patrick way

City State ZIP Code  
half moon bay CA 94019

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.19793

Amount Incurred This Period

1500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
NETWORK GUILD LLCNature of Debt (Purpose):  
CONSULTING WEBSITE DEVELOPMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code  
HENDON VA 20170

Outstanding Balance Beginning This Period

10000.00

Transaction ID: SD12.18207

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ELLEN REYNOLDSNature of Debt (Purpose):  
NEW HEMPSHIRE OFFICE RENTAL

Mailing Address 7 ROBINSON LANE

City State ZIP Code  
MOUNT PRESENT ME 04660

Outstanding Balance Beginning This Period

4000.00

Transaction ID: SD12.13424

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

1) **SUBTOTALS** This Period This Page (optional).....

15500.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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numbered line)

PAGE 89 / 92

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ROB RYAN LLCNature of Debt (Purpose):  
WEBSITE REDESIGNMailing Address 2654 W HORIZON RIDGE PARKWAY  
#B5-141City State ZIP Code  
HENDERSON NV 89052

Outstanding Balance Beginning This Period

10000.00

Transaction ID: SD12.13419

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ROB RYAN LLCNature of Debt (Purpose):  
FUND RAISING FEESMailing Address 2654 W HORIZON RIDGE PARKWAY  
#B5-141City State ZIP Code  
HENDERSON NV 89052

Outstanding Balance Beginning This Period

12900.00

Transaction ID: SD12.18197

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

12900.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ROB RYAN LLCNature of Debt (Purpose):  
CONSULTING FUND RAISINGMailing Address 2654 W HORIZON RIDGE PARKWAY  
#B5-141City State ZIP Code  
HENDERSON NV 89052

Outstanding Balance Beginning This Period

7312.50

Transaction ID: SD12.18198

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7312.50

1) **SUBTOTALS** This Period This Page (optional).....

30212.50

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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numbered line)

PAGE 90 / 92

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
APRIL SHARPLEYNature of Debt (Purpose):  
CONSULTING CAMPAIGN COORDINATION

Mailing Address 3801 TATTERSHALL LANE

City State ZIP Code  
AUSTIN TX 78727

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.18204

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
APRIL SHARPLEYNature of Debt (Purpose):  
CONSULTING CAMPAIGN COORDINATION

Mailing Address 3801 TATTERSHALL LANE

City State ZIP Code  
AUSTIN TX 78727

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.19798

Amount Incurred This Period

6000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TELENOMICS GROUPNature of Debt (Purpose):  
CONSULTING DATABASE MANAGEMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code  
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.18200

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

1) **SUBTOTALS** This Period This Page (optional).....

11500.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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numbered line)

PAGE 91 / 92

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 TELENOMICS GROUP

 Nature of Debt (Purpose):  
 DATABASE MANAGEMENT CONSU-  
 LTING

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City	State	ZIP Code
ST LOUISE	MO	63132

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.18201

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 TELENOMICS GROUP

 Nature of Debt (Purpose):  
 DATABASE MANAGEMENT CONSU-  
 LTING

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City	State	ZIP Code
ST LOUISE	MO	63132

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.18202

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 TELENOMICS GROUP

 Nature of Debt (Purpose):  
 CONSULTING DATABASE MANAG-  
 EMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City	State	ZIP Code
ST LOUISE	MO	63132

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.19796

Amount Incurred This Period

6000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

1) **SUBTOTALS** This Period This Page (optional).....

12000.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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PAGE 92 / 92

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
THE HARTFORD

Nature of Debt (Purpose):  
INSURANCE CAMPAIGN OFFICE

Mailing Address P.O. BOX 2907

City State ZIP Code  
HARTFORD CT 06104

Outstanding Balance Beginning This Period

520.00

Transaction ID: SD12.9257

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

520.00

**1) SUBTOTALS** This Period This Page (optional).....

520.00

**2) TOTALS** This Period (last page this line number only).....

88949.82

**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

47615.73

**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

136565.55